

GENERAL COUNSEL'S REPORT

April 25, 2018

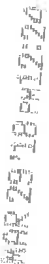
- B. Trustpoint Hospital, LLC, Murfreesboro (Rutherford County), TN – CN1502-006A
- Request for a one year extension from July 1, 2018 to July 1, 2019 to run concurrently with CN1606-024A.

CN1502-006A was approved on May 27, 2015 for the addition of 33 licensed beds, with total beds increasing from 96 to 129 beds. All bed increases occurred within existing space with no new construction involved. Phase 1 was implemented before the facility underwent a change of ownership and certificate of need application CN1606-24A was filed.

CN1606-24A approved on October 26, 2016, added 88 beds in new construction increasing total beds from 129 to 217.

Trustpoint was approved as a 60-bed hospital in CN0610-089AE. The facility has previously added beds under CN1207-031A (16) and also under the 10-bed exemption process twice in 2013 and 2014.

Staff recommends approval of the 12 month extension request so the projects can run concurrently.



ANDERSON & BAKER

An Association of Attorneys

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March 29, 2018

Mr. James Christoffersen, General Counsel
Health Services and Development Agency
500 Deaderick Street, Suite 850
Nashville, Tennessee 37243

Re: Request for Extension
TrustPoint Hospital, LLC, CN1502-006A

Dear Jim:

The referenced project was approved May 27, 2015, expires July 01, 2018, and is for the addition of Thirty-three (33) hospital beds at our facility in Murfreesboro. Attached is a chart which shows the progression of bed additions at our hospital.

As the chart shows, we have two projects which have been approved and are unimplemented. It was our intent to complete these last two projects concurrently, but this intention was not made evident in the last project. As a result, while our plan is to implement both projects at the same time, we will not have both projects complete by the expiration date of the referenced project.

As a result, we respectfully request a one-year extension of CN1502-006A, and I have included a check in the amount of Nine Hundred Ninety-nine and 96/100 Dollars (\$999.96), which reflects a one-year extension at the rate of \$83.33 per month.

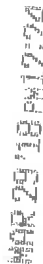
I will attend the April meeting in case further information is needed.

Respectfully, and thank you for your consideration of this matter,



E. Graham Baker, Jr.

c: Dr. Jeffrey D. Woods, DNP, RN-BC



Trustpoint Hospital, LLC

(formerly SeniorHealth of Rutherford, Inc.)

Bed Progression Chart

Project	Child Psych Beds	Adole Psych Beds	Adult Psych Beds	Geri Psych Beds	Detox Beds	Rehab Beds	Total Beds
CN0610-089A	0	0	12	12	9	27	60
CN1207-031A	0	0	+8	+8	0	0	+16
Running Total	0	0	20	20	9	27	76
10 Bed Increase	0	0	+5	+5	0	0	+10
Running Total	0	0	25	25	9	27	86
10 Bed Increase	0	0	+6	+3	+1	0	+10
Running Total	0	0	31	28	10	27	96
CN1502-006A	0	0	+28	+8	+8	-11	+33
Running Total	0	0	59	36	18	16	129
CN1606-024A	+14	+14	+52	0	0	+8	+88
Running Total	14	14	111	36	18	24	217

Notes:

The first two CON projects are implemented and complete. All paperwork has been filed.

First Ten Bed Increase occurred August, 2013

Second Ten Bed Increase occurred October, 2014

CN1502-006A was approved 05/27/2015, it expires 07/01/2018, and is in progress.

CN1606-024A was approved 10/26/2016, it expires 12/19/2019, and is in progress.

As is inferred by the above, the last two projects are being implemented at approximately the same time.



State of Tennessee

Health Services and Development Agency

Andrew Jackson, 9th Floor, 502 Deaderick Street, Nashville, TN 37243

www.tn.gov/hsda

Phone: 615-741-2364

Fax: 615-741-9884

June 24, 2015

E. Graham Baker, Jr., Esq.
2021 Richard Jones Road, Suite 120
Nashville, TN 372115

RE: Trustpoint Hospital, LLC - CN1502-006A

Dear Mr. Baker:

As referenced in our recent letter, please find enclosed your Certificate of Need for the above-referenced application that was approved at the May 27, 2015 meeting of the Tennessee Health Services and Development Agency.

The Health Services and Development Agency Rules require that an Annual Progress Report be submitted each year and a Final Project Report form is to be submitted within ninety (90) days after completion of a project which shall include completion date, final costs, and other relevant information in regards to the project, pursuant to Public Acts 2002, Chapter No. 780, § 16-11-1609(d). Also required is the registration of certain medical equipment pursuant to Tennessee Code Annotated § 68-11-1607(i), which states "*The owners of the following types of equipment shall register such equipment with the health services and development agency: computerized axial tomographers, lithotripters, magnetic resonance imagers, linear accelerators and positron emission tomography.*" "*The survey shall include but not limited to the identification of the equipment and utilization data according to source of payment.*"

The aforementioned forms can be found on the Agency's website at www.tennessee.gov/HSDA. Should you have any questions or require further information regarding this Certificate, please do not hesitate to contact this office.

Sincerely,

Melanie M. Hill
Executive Director

cc: Trent Sansing, TDH/Health Statistics, PPA
Ann R. Reed, TDH/HCF
Bill Harmon, TDH/HCF

STATE OF TENNESSEE
Health Services and Development Agency



Certificate of Need No. **CN1502-006A** is hereby granted under the provisions of T.C.A. § 68-11-1601, *et seq.*, and rules and regulations issued thereunder by this Agency.

To: FenX Healthcare, Inc.
1009 North Thompson Lane
Murfreesboro, TN 37129

For: Trustpoint Hospital, LLC

This Certificate is issued for: The addition of 33 licensed beds, with total beds increasing from 96 to 129 beds. The beds will be classified as follows: Adult Psychiatric Beds for ages 18-64 will increase from 31 to 59 beds; Geriatric Psychiatric Beds will increase from 28 to 36; Medical Detoxification beds will increase from 10 to 18; and Physical Rehabilitation beds will decrease from 27 to 16 beds. There will be no new construction. All bed increases will occur within existing space.

On the premises located at: 1009 North Thompson Lane
Murfreesboro (Rutherford County), TN 37129

For an estimated project cost of: \$935,000.00

The Expiration Date for this Certificate of Need is

July 1, 2018

or upon completion of the action for which the Certificate of Need was granted, whichever occurs first. After the expiration date, this Certificate of Need is null and void.

Date Approved: May 27, 2015


Chairman

Date Issued: June 24, 2015


Executive Director



State of Tennessee

Health Services and Development Agency

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ANNUAL PROGRESS REPORT ANNUAL REVIEW FOLLOWING CERTIFICATION

Project Name: TrustPoint Hospital, LLC

Certificate of Need #: CN1502-006A

Legal Owner: Acadia Healthcare Company

Approval Date: May 27, 2015

Expiration Date: July 1, 2018

Project Description:

This Certificate was issued for: The addition of 33 licensed beds, with total beds increasing from 96 to 129 beds. The beds will be classified as follows: Adult Psychiatric Beds for ages 18-64 will increase from 31 to 59 beds; Geriatric Psychiatric Beds will increase from 28 to 36; Medical Detoxification beds will increase from 10 to 18; and Physical Rehabilitation beds will decrease from 27 to 16 beds. There will be no new construction. All bed increases will occur within existing space.

On the premises located at: 1009 North Thompson Lane
Murfreesboro (Rutherford County), TN 37129

For an estimated project cost of: \$935,000.00

******PLEASE SUBMIT EVIDENCE TO SUPPORT EACH ANSWER******

In a brief narrative, please describe the current stage of completion for the project (use another sheet of paper if necessary). **Please note that this report will not be considered complete without this information.**

This Certificate of Need was granted as a non-construction (remodel only) project to TrustPoint Hospital, LLC formerly owned by FenX Healthcare, Inc. TrustPoint Hospital, LLC was sold to Acadia Healthcare Company on May 1, 2016. The project owner was granted a subsequent and additional Certificate of Need (CN1606-024A) on October 26, 2016 with an expiration date of December 1, 2019. This new Certificate of Need is a construction project and will incorporate the remaining work from CN1502-006A in its scope. All work is anticipated to be complete on or about July 2018.

CONSTRUCTION PROJECTS

A.

1. Anticipated date of project completion. _____
2. Provide written confirmation from the contractor documenting the stage of construction at the current time.
3. If proposed construction costs have increased over ten (10%) percent please provide information as an attachment to this form. Please note that such an overrun could require additional action before the Agency.



State of Tennessee

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B. NON-CONSTRUCTION PROJECTS

1. Anticipated date of service implementation, acquisition or operation of the facility or equipment as certified.

July 2018

2. Provide written confirmation from the institutional representative verifying the occupancy/opening date for the service, equipment, or facility.

Jeffrey W. L. CEO
Signature of Authorized Agent or Chief Operating Officer

April 5, 2017
Date